

### STATE OF NEW HAMPSHIRE

#### 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 3 0 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s)	George W. Rous	sos and Lindsa	y E. Nadeau	LECTARIMENT OF		
II. Name of lobbyist's partnership, firm or corporation, if any:						
Orr & Reno, P.A.	partnership, firm or c	orporation)		····		
45 S. Main Street, P. Business Address: (Street)	O. Box 3550	Concord (Town/City)	NH (State)	03302 (Zip Code)		
(603) <u>224-2381</u> (Telephone)	(603	) 224-2318 (Fax)	e-mail <u>grousso</u> s	@orr-reno.com		
III. This statement cover reportable expense trans			ts for each client, OR you ma o any one client).	ay file a separate report for		
☑ All reportable transact	ions occurring in the	months prior to	the reporting date relative to th	e following client:		
	rance Association all Name of Client as i		bbyist Registration Form)			
	ons by the lobbyist (client.	including the lob	byist's family), or the lobbying	; firm listed below which are		
	pril 25, 2018 🛭 om date of registratio	n to 3/31/18	July 25, 2018 activity from 4/1/18 to 6/30/18			
	ctober 31, 2018	0/18	January 30, 2019 [] activity from 10/1/18 to 12/31/	(18		
			transactions made since the Secretary of State's Office, S.			
VI. Check if additional re	eports are attached	:				
		•	le Addendum A- Fees and Ex	•		
☐ If you have paid an ho Expense Reimbursement	norarium or reimbui	rsed expenses, yo	u must file <b>Addendum B</b> – Rep	oort of Honorariums or		
•	our family has made	political contribu	tions, you must file <b>Addendu</b>	m C- Political Contributions		
Sworn Statement/Affirms I have read RSA 15, RSA and complete to the best of	15-B, RSA 14-C and		ereby swear or affirm that the f	oregoing information is true		
Man Will	m		04/25/18			
(Signature of lobbyist)		<del>_</del> _	(Date	e)		
George W. Roussos (Print Name of lobbyist)						

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# STATE OF NEW HAMPSHIRE

#### **Lobbyists Fees and Expenses** Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:		
Orr & Reno. P.A.		
Orr & Reno, P.A.  (Name of partnership, firm or corporation)		
III. Name of Client American Insurance Association	Date04	1/25/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The greeduced by any expenses:	t relations, or p	public relations ser
a) Total of all fees received in this reporting period	a) \$	9,978.93
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y		0.00
c) Total of all fees received to date (Add lines a and b)	c) \$	9,978.93
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this reportance purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if ex may be filed to e aggregate too expenses; (b) the le: meals pureless than \$10 that ed with a value orting period of ue of greater ter than \$25, both, expense rein	spenditures are marger than lobby ist(s) tall of all expenses are aggregate total hased during a but at is given to the perior of \$25.00 or less of greater than \$25, purchase at not greater than bursement, or possible to the perior of \$25.00 or less of greater than \$25.00 or les
a) Tatal accurace to a vincuity of this man artifact manifest for calculate home fits	a) \$	
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	100.00
,	b) \$	

d) Total expenses for this reporting period	d) \$	100.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	100.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees du	ring this reporting
Paid to:	Amount:	
	\$	
	\$	14-7
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the fore	going information
Jam M mm	04/25/18	<b>;</b>
(Signature of lobbyist)	(Dat	
George W. Roussos (Print Name of lobbyist)		

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partr	ership, firm, or corne	oration: Orr & Reno, P.	Α.
	lank if Statement is fo	or the partnership, firm, or	corporation and not related to any
Date of Report (check o	ne):		
April 25, 2018 ⊠	July 25, 2018 🗆	October 31, 2018 □	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
_1 Addendum A(s)	,		
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm complete to the best of n		ief.	nt and each Addendum is true and
(Signature of lobbyist)			(Date)
George W. Roussos	<u> </u>		
(Print Name of lobbyist)			